



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/722,172
		Filing Date	November 24, 2003
		First Named Inventor	Brian J. Ray
		Art Unit	2835
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission		Attorney Docket Number	2717P099

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <div style="margin-left: 20px;"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) </div> <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"> <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA </div> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </div>	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <div style="margin-left: 20px;"> <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) </div>	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> - check in the amount of \$130.00 - petition is to make special (15pp) - drawings are formal drawings - return postcard </div>	
			<input type="checkbox"/>

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Gregory D. Caldwell, Reg. No. 39,926 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	March 4, 2005

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Annie G. Pearson
Signature	
Date	March 4, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 06/04/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450